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Bib Data Sheet

CONFIRMATION NO. 2387

|   |  |   |                        |                                 |
|---|--|---|------------------------|---------------------------------|
| SERIAL NUMBER<br>09/864,819   | FILING DATE<br>05/24/2001<br>RULE  | CLASS<br>707  | GROUP ART UNIT<br>2176 | ATTORNEY<br>DOCKET NO.<br>82654 |
| <b>APPLICANTS</b><br>Thomas W. Smith, Fredericksburg, VA  |  |   |                        |                                 |
| <b>** CONTINUING DATA</b>   |  |   |                        |                                 |
| <b>** FOREIGN APPLICATIONS</b>  |  |   |                        |                                 |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 07/24/2001                             |  |   |                        |                                 |
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>allowance | STATE OR<br>COUNTRY<br>VA   | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>12           |
| Verified and<br>Acknowledged<br><br>Examiner's Signature  | Initials   |   |                        | INDEPENDENT<br>CLAIMS<br>2      |
| <b>ADDRESS</b><br>James B. Bechtel, Esq.<br>NSWCDD (CD222)<br>Dahlgren ,VA 22448-5100           |  |   |                        |                                 |
| <b>TITLE</b><br>Tool for marking up electronic documents  |  |   |                        |                                 |
| FILING FEE<br>RECEIVED<br>710   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                        |                                 |